
20.b. Rehabilitative Services for Pregnant Woman (continued)

(c) Indicated prevention service.

1. Targeted audience: Includes members of the population that do not have a diagnosis of substance abuse or dependency, but do report actually experiencing some problems related to their use of alcohol and drugs.
2. Goals and objectives:
 - a. Decreased alcohol and other drug use;
 - b. Attitude changes which support an individual in making low risk choices related to alcohol and other drug use;
 - c. A greater readiness for and response to treatment for an individual with a substance abuse related diagnosis who is receiving this service as an adjunct to a substance abuse treatment plan; and
 - d. Increased skills necessary to make and maintain low risk alcohol and other drug use choices during pregnancy and throughout life.
3. Service limitation. An indicated prevention service shall be provided in ¼ hour increments, not to exceed a total of twenty-seven (27) hours.

(d) Qualifications of providers. All of the prevention services are provided by a Kentucky certified preventionist or a Qualified Substance Abuse Treatment Professional (QSATP) with training in prevention strategies and procedures.

(3) Outpatient services.

(a) Outpatient services may include:

1. Individual therapy;
2. Group therapy;
3. Family therapy. This service is counseling provided to an eligible individual and one (1) or more significant others with the primary purpose of which is the treatment of the individual's condition;
4. Psychiatric evaluation provided by a psychiatrist;
5. Psychological testing provided by a psychologist;
6. Medication management provided by a physician or an advanced registered nurse practitioner; and
7. Collateral care. Involves counseling or consultation services provided directly or indirectly to the recipient through the involvement of a person or person's in a position of custodial control or supervision of the individual in the counseling process. Services are to meet the treatment needs of the eligible individual and shall be a part of the individual's treatment plan. Presence of the recipient in the counseling session is not necessarily required. However, when the recipient is present, reimbursement for the collateral counseling and individual or group counseling for the same session is not allowed.

(b) Service limitations.

1. Group therapy.
 - a. There shall be no more than twelve (12) persons in a group therapy session; and
 - b. Group therapy shall not include physical exercise, recreational activities or attendance at substance abuse and other self-help groups.
2. Collateral care shall be limited to individuals under age twenty-one (21) and no more than four and one-half (4.5) hours of service shall be reimbursed during a one (1) month period.
3. No more than eight (8) hours of outpatient services shall be reimbursed during a one (1) week period.

20.b. Rehabilitative Services for Pregnant Woman (continued)

(4) Day Rehabilitation Services.

- (a) Shall be an array of substance abuse treatment services in a structured program format that is scheduled to take place multiple hours a day, several times a week and may include individual and group therapy, information on substance abuse and its effects on health, fetal development and interpersonal relationships.
- (b) May be covered when provided to an individual in a non-residential setting or as a component of a residential program.
- (c) Service limitations:
 - 1. Reimbursement for a day rehabilitation service provided in a non-residential setting shall be limited to no more than 7 hours per day not to exceed twenty (20) hours per week.
 - 2. Reimbursement for a day rehabilitation service provided in a residential setting shall be limited to no more than 8 hours per day not to exceed forty-five (45) hours per week.
 - 3. Payment shall not be made for care or services for any individual who is a patient in an institution of more than 16 beds, that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases.
 - 4. Room and board costs shall not be covered under this benefit.

(5) Outpatient and Day Rehabilitation services shall be provided by a qualified substance abuse treatment professional (QSATP) that meets one of the following requirements:

- (a) A certified alcohol and drug counselor; or
- (b) An individual who holds a license or certification in medicine, psychology, social work, nursing, marriage and family therapy, professional counselor, or art therapy with 24 hours of additional training in substance abuse or dependency related problems and information specific to working with the target population; or
- (c) A bachelor's or greater degree with additional training of 45 hours with 12 hours in substance abuse or dependence related problems, 12 hours specific to the target population, 12 hours in prevention strategies and procedures, and the remaining 9 hours may be in one or more of the identified training topics.

(6) Community support services.

- (a) A community support service shall be provided if the service is identified as a need in the individual's treatment plan.
- (b) A community support service shall be a face-to-face or telephone contact between an individual and a qualified community support provider.
- (c) A community support service shall include:
 - 1. Assisting an individual in remaining engaged with substance abuse treatment or community self-help groups;
 - 2. Assisting an individual in resolving a crisis in an individual's natural environment; and

20.b. Rehabilitative Services for Pregnant Woman (continued)

3. Coaching an individual in her natural environment to:
 - a. Access services arranged by a case manager; and
 - b. Apply substance abuse treatment gains, parent training and independent living skills to an individual's personal living situation.
 - (d) A community support provider shall coordinate the provision of community support services with an individual's primary provider of case management services.
 - (e) Community support staff qualifications.
 1. A high school diploma or general equivalent diploma.
 2. Two years of supervised experience in substance abuse treatment setting and knowledge of substance abuse related self-help groups.
 3. Twenty hours of training on the dynamics and treatment of substance abuse, recovery issues unique to pregnant women and women with dependent children and HIV positive individuals, strategies to defuse resistance, professional boundary issues that address enabling behaviors and protecting a staff member, who may be a recovering substance abuser, from losing their own sobriety.
- (7) Reimbursement for a substance abuse service shall not be payable for an individual who is a resident in a Medicaid-reimbursed inpatient facility.
- (a) Reimbursement for services shall be based on the following units of service:
1. Universal prevention service shall be a one-quarter (1/4) hour unit;
 2. Selective prevention service shall be a one-quarter (1/4) hour unit;
 3. Indicated prevention service shall be a one-quarter (1/4) hour unit;
 4. Outpatient service shall be a one-quarter (1/4) hour unit for the following modalities:
 - a. Individual therapy;
 - b. Group therapy;
 - c. Family therapy;
 - d. Psychiatric evaluation;
 - e. Psychological testing;
 - f. Medication management; and
 - g. Collateral care.
 5. An assessment service shall be a one-quarter (1/4) hour outpatient unit;
 6. Day rehabilitation services shall be a one (1) hour unit;
 7. Case management services shall be a one-quarter (1/4) hour unit; and
 8. Community support shall be a one-quarter (1/4) hour unit.
- (b) Qualifications of Providers
1. Services are covered only when provided by any mental health center, their subcontractors and any other qualified providers, licensed in accordance with applicable state laws and regulations.
 2. The provider shall employ or have a contractual agreement with a physician licensed in Kentucky.
 3. A provider must have staff available to provide emergency services for the immediate evaluation and care of an individual in a crisis situation on a twenty-four (24) hour a day, seven (7) day a week basis.

Targeted Case Management services for pregnant women including postpartum women for sixty (60) day period after the pregnancy ends and any remaining days in the month in which the 60th day falls.

A. By invoking the exception to comparability allowed by 1915(g)(1) of the Social Security Act, this service will be reimbursed when provided to persons who are:

- (1) Women diagnosed as a pregnant woman or postpartum woman up to the end of the month of sixty days following the date of delivery who has applied for or is receiving substance abuse services through Medicaid.

B. Areas of State in which services will be provided:

☒ Entire State

☐ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide:

C. Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services: Case management is a service which allows providers to assist eligible individuals in gaining access to needed medical, social, education, and other services. Consistent with the requirements of Section 1902(a)(23) of the Act, the providers will monitor client treatment to assure that clients receive services to which they are referred.

(1) Substance abuse case management services.

(a) Case management shall be:

1. A face-to-face or telephone contact between or on behalf of an individual and a qualified substance abuse professional; and
2. For the purpose of reducing or eliminating an individual's substance abuse problem by assisting an individual in gaining access to needed medical, social, educational and other support services.

(b) Case management services shall include:

1. The development of a service plan that identifies an individual's case management needs and projected outcomes; and
2. Activities that support the implementation of an individual's service plan.

(c) Case management services shall not be connected with a specific type of substance abuse treatment but shall follow an individual across the array of substance abuse treatment services identified in an individual's treatment plan.

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- (d) Service limitations. The following activities shall not be reimbursed by Medicaid:
1. An outreach or case-finding activity to secure a potential individual for services;
 2. Administrative activities associated with Medicaid eligibility determinations; and
 3. The actual provision of a service other than a case management service.

A. Qualifications of Providers:

- (1) Services are covered when provided by any mental health center, and their subcontractors, and any other qualified providers, licensed in accordance with applicable state laws and regulations.
- (2) Demonstrated capacity to provide all core elements of case management including : Assessment skills, care/services plan development, linking/coordination of services, reassessment/follow-up, training specific to the target population, an administrative capacity to insure quality of services in accordance with state and federal requirements and a financial system that provides documentation of services and costs.
- (3) The provider shall employ or have a contractual agreement with a physician licensed in Kentucky.
- (4) A provider must have staff available to provide emergency services for the immediate evaluation and care of an individual in a crisis situation on a twenty-four (24) hour a day, seven (7) day a week basis.
- (5) Qualifications for case management services:
 - (a) An alcohol and drug counselor certified by the Kentucky Board of Certification for Alcohol and Drug Counselors;
 - (b) An individual who has a bachelors degree or greater in any field, from an accredited college or university who meets the training, documentation and supervision requirements;
 - (c) A Kentucky licensed physician.
 - (d) A psychiatrist who is licensed in Kentucky.
 - (e) A psychologist licensed or certified by the Kentucky Board of Examiners of Psychology;
 - (f) A psychological associate certified by the Kentucky Board of Examiners of Psychology;

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- (g) A social worker licensed or certified in Kentucky;
 - (h) A Kentucky licensed registered nurse with the following combinations education and work experience:
 - 1. A registered nurse with a masters degree in psychiatric nursing from an accredited college or university;
 - 2. A bachelor of science degree in nursing from an accredited college or university and one year of clinical work experience in the substance abuse or mental health field;
 - 3. A diploma graduate in nursing and two years of clinical work experience in the substance or mental health field; or
 - 4. An associate degree in nursing from an accredited college or university and three years of clinical work experience in the substance abuse or mental health field;
 - (i) A Kentucky licensed advanced registered nurse practitioner;
 - (j) A marriage and family therapist licensed by the Kentucky Board of Licensure of Marriage and Family Therapists;
 - (k) A Kentucky-certified professional counselor; or
 - (l) A Kentucky-certified professional art therapist.
- F. The State assures that the provision of case management services will not unlawfully restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
- (1) Eligible recipients will have free choice of the available providers of case management services.
 - (2) Eligible recipients will have free choice of the available providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purpose.

XXXIV. Rehabilitation Services for Pregnant Women

Substance abuse services covered for pregnant women including postpartum women for a sixty (60) day period after the pregnancy ends and any remaining days in the month in which the 60th day falls, provided by any mental health centers, their subcontractors and any other qualified providers, licensed in accordance with applicable state laws and regulations. Payment for these services will be based on cost in accordance with attachment 4.19-B, pages 20.15-20.15.5.

Reimbursement for services shall be based on the following units of service:

Universal prevention service shall be a one-quarter (1/4) hour unit;
Selective prevention service shall be a one-quarter (1/4) hour unit;
Indicated prevention service shall be a one-quarter (1/4) hour unit;
Outpatient service shall be a one-quarter (1/4) hour unit for the following modalities:

Individual therapy;
Group therapy;
Family therapy;
Psychiatric evaluation;
Psychological testing;
Medication management; and
Collateral care;

An assessment service shall be a one-quarter (1/4) hour outpatient unit;
Day rehabilitation services shall be a one (1) hour unit;
Case management services shall be a one-quarter (1/4) hour unit; and
Community support shall be a one-quarter (1/4) hour unit;